#### FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 F 12<sup>th</sup> Ste 14

Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

# **DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Resemboring

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically.

		100000		
COMMITTEE NAME (Must be same as on Statement of Organiz	ration)	7 _		
LU BARRON FOR SUPERVISOR RE-ELECTION COMI	1 1 1	ORM		
IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2)\$ (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Box 11) Local Ballot Issue	e (7)School Board or Other Political	(Re	<b>DR-2</b> ev. 12/2009) r <u>Office Use Or</u> mm, #	
CANDIDATE COMMITTEES ONLY: Candidate Name LU BARRON Office Sought COUNTY SUPERVISOR	Political Party (if applicable) DEMOCRAT District (if Senate or House)	Sci Co Au	gged in anned mputer dited	DISCLOSUF DISCLOSUF DISCLOSUF
Late reports are subject to possible civil and criminal penalties. Pursu candidate's committee, and the chairperson, for any other type of con	ant to lowa Code sections 68B.32A mittee, is the individual responsible	(7) and 68A for filing tin	.401(3), the ca	ndidate, fer a
gy Vnil let	319-431-764		10/1	8 / 10
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATES	IGNED
I AM FILING A OCTOBER 19, 2010	REPORT FOR (1) ELECTION	//2)NON-E	I ECTION VE	AP
(report date)	Indicate by	·	LLOTION	nix.
CHECK IF AMENDMENT TO REPORT DATED		Local Comn	nittees, enter Da	ite of Election
☐ Check if this is final (termination) report and attach Notice of I (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	County & Lo which Electi LINN		s, enter County in
STATEMENT OF CASH ON HAND	***			
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the car of the last reporting period or must be zero if this is first	sh on hand at the end	<b>\$</b>	20,469.52	
ADD TOTAL MONEY TAKEN IN THIS PERIOD	•			
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		4,260.00	*
Schedule F: Loans Received total (Attach Schedule F)	***************************************	•••••	0.00	
Schedule H: Total Sales of Campaign Property (Attach	Schedule H)		0.00	
(Schedule H applies to Candidates' Commi			24 720 52	
	SUB-TOTAL	\$	24,729.52	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			6 101 64	
Schedule B: Expenditures total (Attach Schedule B) (*	also see debts and loans below).		6,121.64	
Schedule F: Loan Repayments total (Attach Schedule	F)	*********	0.00	
CASH ON HAND at the end of this reporting period (if final repor	t balance must be zero)	\$	18,607.88	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedu	ie E)	\$	0.00	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	F)	\$	0.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)		- Constitution of the Cons	_YES _	NO
CANDIDATE COMMITTEES ONLY:			0.00	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attact	Schedule H)	\$	0.00	7.70
STATE COMMITTEES: Submit a reconciled campaign account	hank statement in January of eac	h voor		

### For Instructions, See Back of Form

### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE	

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIFFOR FUND RAISER INCOME
07/09/2010	ID#	MAUREEN OSAKO 1372 NORWOOD DR SE CEDAR RAPIDS IA 52403		\$100.00	
07/16/2010	ID# CK#	RONALD BATY 225 CRESCENT ST SE CEDAR RAPIDS, IA 52403		100.00	
07/27/2010	ID# CK#	JOHN H WOLLNER 716 5TH AVE SE CEDAR RAPIDS IA 52403		100.00	
07/30/2010	ID# 9645 CK# 1640	LINN PHOENIX CLUB 610 THIRD AVE N MOUNT VERNON IA 52314		2000.00	
08/28/2010	ID# CK#	BRIAN D GARDNER 4407 WENDY LEE LANE NW CEDAR RAPIDS IA 52405		50.00	
08/30/2010	ID# 17261 CK# 1042	R.P.E.L.F. OF IOWA 3802 6TH AVE DES MOINES IA 50313	·	1000.00	
09/28/2010	ID# 9680 CK# <sub>5189</sub>	CEDAR RAPIDS BUILDING TRADE COUNCIL CR/IC BUILDING TRADES PAC 5000 J ST SW CEDAR RAPIDS IA 52404		500.00	
10/04/2010	ID# CK#	DENNIS A DRAHOS 1477 BERTRAM ST CEDAR RAPIDS IA 52403		100.00	
10/04/2010	ID# CK#	GARY J SHEA 425 2ND ST SE, SUITE 1010 CEDAR RAPIDS IA 52401		185.00	
10/11/2010	ID# CK#	JANE O PROWELL 2220 GRANDE AVE SE CEDAR RAPIDS IA 52403		100.00	
			SUB-TOTAL	¢ 4235.00	

TOTAL (if last page of this schedule)

Page 1 of 2 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

# For Instructions, See Back of Form

# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(rtev. 07703	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		IECK THIS BOX IF
LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE		ICHOITO TORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
10/13/2010	CK#	JAMES E WASTA 3805 WILLOWBEND CT NE CEDAR RAPIDS IA 52402		\$25.00	
	ID#	ODDITION IN SERVE		· · · · · · · · · · · · · · · · · · ·	
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		<i>f</i> .	SUB-TOTAL	\$ 25.00	
		TOTAL (if last page	of this schedule)	<b>\$</b> 4260.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

SCHEDULE

(Pay 07/02)

MONETARY

B 600	MANAGE AND ADDRESS OF THE PARTY	mener	THE PARTY	******	****	-
7	9Y 59	0.00	400	10.00	43.45	Mar.
12	## <b>C</b>		200	313	10.27	100
F 22		175 D		1100	77.5	22.2
44.0	comme	y Hirth		1000	10000	

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC AME	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/02/2010	ID# CK#	INFORMATICS INC 118 2ND ST SE SUITE 200 CEDAR RAPIDS IA 52401	WEBSITE REVISIONS	\$ 44.50
09/07/2010	ID# CK#	I INN COUNTY AUDITOR PO BOX 1328 CEDAR RAPIDS IA 52406	VOTER DATA	14.00
09/09/2010	ID# CK#	MAILING SERVICES INC 950 CAPITAL DRIVE SW CEDAR RAPIDS IA 52404	MAILING/POSTAGE	2216.80
10/05/2010	ID# CK#	MAILING SERVICES INC 950 CAPITAL DRIVE SW CEDAR RAPIDS IA 52404	DATA PROCESSING/MAILING SERVICES	541.92
10/05/2010	ID# CK#	ADCRAFT PRINTING 309 FIFTH AVE SE CEDAR RAPIDS IA 52406	POSTCARDS	3099.79
10/05/2010	ID# CK#	MA COOK DESIGN 222 27TH ST NE CEDAR RAPIDS IA 52402	POSTCARDS	204.63
	ID# CK#			
	ID#			-
	Ск#			
			SUB-TOTAL	. \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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\$ 6121.64

TOTAL (if last page of this schedule)